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MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET Substitute for Form PTO-1360 (For use with Form PTO/SB/06)						Application Number 10/783,884		Filing Date 19 February, 2004		<input type="checkbox"/> To be Mailed			
						Applicant(s) SCOTT ET AL.						Page 1 of 2	
* May be used for additional claims or amendments													
CLAIMS	AS FILED		AFTER FIRST AMENDMENT 08/06/2007		AFTER SEC. AMENDMENT		*			* 08/06/07		*	
	Indep	Depend	Indep	Depend	Indep	Depend		Indep	Depend	Indep	Depend	Indep	Depend
1							51						
2							52						
3							53						
4							54						
5							55			1			
6							56				1		
7							57				1		
8							58				1		
9							59				1		
10							60				1		
11							61				1		
12							62				1		
13							63				1		
14							64				1		
15							65				1		
16							66				1		
17							67				1		
18							68				1		
19							69				1		
20							70				1		
21							71				1		
22							72						
23							73				1		
24							74				1		
25			1				75			1			
26				1			76				1		
27				1			77				1		
28				1			78				1		
29				1			79				1		
30				1			80				1		
31				1			81				1		
32				1			82				1		
33				1			83						
34				1			84				1		
35				1			85				1		
36				1			86				1		
37				1			87				1		
38				1			88				1		
39				1			89				1		
40				1			90				1		
41				1			91				1		
42				1			92				1		
43				(1)			93				1		
44				1			94				1		
45							95				1		
46							96				1		
47							97				1		
48							98				1		
49							99				1		
50							100				1		
Total Indep							Total Indep						
Total Depend							Total Depend						
Total Claims							Total Claims						

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. **SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.**

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Part of Paper No080607-1.

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	Indep	Depend	Indep	Depend	Indep	Depend		Indep	Depend	Indep	Depend	Indep	Depend
101				1			151						
102				1			152						
103			1				153						
104							154						
105							155						
106							156						
107							157						
108							158						
109							159						
110							160						
111							161						
112							162						
113							163						
114							164						
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133							183						
134							184						
135							185						
136							186						
137							187						
138							188						
139							189						
140							190						
141							191						
142							192						
143							193						
144							194						
145							195						
146							196						
147							197						
148							198						
149							199						
150							200						
Total Indep			4				Total Indep						
Total Depend				68			Total Depend						
Total Claims			72				Total Claims						

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